MESSAGE FROM THE CHAIR

Colin Driscoll MD, Chair, ACI Alliance
Professor and Chair, Department of Otolaryngology–Head and Neck Surgery
Mayo Clinic, Rochester, MN
driscoll.colin@mayo.edu

The American Cochlear Implant Alliance has not been on summer vacation. We are in the early phases of kicking off some exciting new initiatives. ACI Alliance members had expressed interest in creating a more consistent, effective and streamlined CI referral and evaluation process in the VA system. This led to productive conversations with senior VA leadership and ultimately a plan to work together collaboratively to explore options for further enhancing the excellent care hearing impaired veterans receive.

Two main early areas of focus will be to: 1) Explore mechanisms to identify and efficiently get candidates referred to CI centers and 2) Review existing VA cochlear implant candidacy criteria and modify based on current science and best practices. A small subgroup of subject matter experts representing ACI Alliance and the VA are being gathered to consider existing candidacy testing protocols, VA audiology CI education, and barriers to referral. All of this work is also relevant to another new ACI Alliance initiative to develop some best practices guidelines for determining CI candidacy in adults and children. After some preliminary work by the subgroups, we look forward to gathering feedback from the broader ACI Alliance membership.

I continue to be impressed by the level of engagement from you (our membership across all specialties). I look forward to sharing later this year some other plans we have for growing and solidifying our organization which will allow for even more participation by members and opportunities to positively impact the field we are all so passionate about. It is an exciting time of change for the ACI Alliance and I want (need) your help in making it the best it can be.
ACI Alliance Board of Directors

Colin Driscoll MD, Chair of the Board
Professor and Chair
Department of Otolaryngology—Head and Neck Surgery
Mayo Clinic

Meredith Holcomb AuD, Vice-Chair
Clinical Director, Cochlear Implant Program
Clinical Assistant Professor
Department of Otolaryngology—Head and Neck Surgery
Medical University of South Carolina

Oliver Adunka MD, Treasurer
Professor and Director
Otolaryngology and Cranial Base Surgery
Department of Otolaryngology—Head and Neck Surgery
Ohio State University/Nationwide Children’s Hospital

John Dornhoffer MD
Professor and Chairman
Samuel D. McGill Chair in Otolaryngology Research
Director of Otology and Neurotology
University of Arkansas for Medical Sciences/Children’s Hospital

Camille Dunn PhD
Director of Cochlear Implant Program
Department of Otolaryngology—Head and Neck Surgery
University of Iowa

Melissa J.W. Hall AuD
Clinical Assistant Professor
Speech and Hearing Center
Department of Speech, Language and Hearing Sciences
University of Florida Health

David S. Haynes MD, Membership Chair
Professor of Otolaryngology, Neurosurgery, and Hearing and Speech Sciences
Cochlear Implant Program Director
Vanderbilt University Medical Center

David Kelsall MD
Medical Director, Rocky Mountain Ear Center
for Hearing/CO Neurological Institute

Jan Larky MA, Secretary
Stanford Ear Institute, Cochlear Implant Program
Stanford Health Care

Amy McConkey Robbins M.S.
Speech Language Pathologist
Communication Consulting Services (IN)

Andrew G. Shuman MD
Assistant Professor
Department of Otolaryngology—Head and Neck Surgery
University of Michigan Health System

Fred Telischi MD, CI 2018 Pediatric Co-Chair
Chairman, Department of Otolaryngology
Miller School of Medicine
University of Miami Ear Institute

Andrea D. Warner-Czyz PhD
Assistant Professor
University of Texas at Dallas
Callier Center for Communication Disorders

Donna L Sorkin MA
Ex Officio Board Member

Steven R. Rech
Legal Advisor to the Board of Directors
Partner, Vors, Sater, Seymour and Pease LLP

Cl2019: Pediatric Cochlear Implantation on the Beach!
The Diplomat Hotel, Hollywood, FL
July 10–13, 2019

Educational Course Directors
Ivette Cejas PhD and Fred Telischi MD
University of Miami Department of Otolaryngology/Ear Institute

Plan now to join us—with your family during summer vacation—on July 10–13, 2019 in the beautiful, newly renovated Diplomat Beach Resort on Hollywood Beach, Florida. This conference will provide an opportunity to immerse yourself in the latest developments related to pediatric cochlear implantation, with specific emphasis on the management of the “whole child” using a multidisciplinary approach. The University of Miami Department of Otolaryngology/Ear Institute has organized a comprehensive scientific program that addresses both clinical and research innovations in pediatric CI.

The major themes for CI2019 are:
• Beyond the CI: The Role of Therapy, Education, and Family Engagement
• Moving the Field Forward: Expanding Indications and Special Needs Populations
• New Models of Service Delivery: Models for a Global Healthcare Market
• Complex Cases: Surgical and Audiological Management
• Advancements in Pediatric CI: Science, Technology and Medicine

The program will be enhanced with engaging keynote speakers, open discussions of controversial topics, protected time for audience participation and panel discussions, and innovative presentation styles. Nina Kraus PhD will give this year’s John Niparko Memorial Lecture on “Sound Processing in Healthy and Hurting Brain: What have we learned from Music and Concussion?” Dr. Kraus is the director of the Auditory Neuroscience Laboratory at Northwestern University.

http://www.brainvolts.northwestern.edu/

continued on page 3

Nina Kraus PhD
A special session will focus on managing bilingual Spanish-English patients/families. Topics will help address the need for developing testing batteries and materials for bilingual patients, cultural differences in providing care, and resources and strategies that can easily be incorporated into clinical practice. A Saturday afternoon post-conference symposium will be given in Spanish to bring together leading clinicians and researchers from the United States and Latin American. This three-hour session will address common challenges encountered by pediatric CI patients and their parents in their native language.

The meeting will be organized to maximize (and encourage) the potential for interactive dialogue and discussions during the formal presentations, poster sessions, networking in tropical settings—in and outside—in the hallways and balconies and, of course, on the beach! Formal networking sessions are planned for psychologists and educators working with pediatric CI recipients given the impact of social, emotional, and educational issues on the overall CI outcomes. We are also bringing back, by popular demand, the student poster awards. (More information on page 4 on student offerings.)

To fit with our Miami lifestyle and approach, the dress code will be elegant/casual resort wear. No suits and ties allowed!

The meeting venue provides convenient proximity between the hotel and conference center while the logistical layout of the meeting rooms allows quick and easy movement between concurrent sessions and the exhibitor hall. Summer vacation means sun, sand, ocean, good food and culture. All of these will be available in plentiful quantities. The recent major renovation of the classic Diplomat Hotel offers a spectacular venues for attending sessions and enjoying the Atlantic breezes by numerous pools (including one with a unique glass bottom), a variety of scrumptious restaurants and bars, entertainment for all ages and a family atmosphere.

Nearby water activities of every type may be enjoyed. World class boating, fishing, snorkeling, and scuba diving are available. Biscayne Bay National Park is a unique underwater natural wonder that can be explored. A short Uber/Lyft ride can take you to the world famous South Beach and museums/cultural/music venues in downtown Miami and Ft. Lauderdale. Those brave enough can venture into the Everglades National Park for an alligator experience. Of course, salsa dancing and mojitos may be experienced almost anywhere. Prepare yourself for our opening celebration, Havana Nights, on Thursday evening which is sure to give you a taste of Cuban culture.

If you haven’t been to a CI meeting in a while, this is one that you don’t want to miss. From the breathtaking views, innovative content, networking opportunities, research updates and engaging sessions with multidisciplinary professionals, you will undoubtedly be up-to-date with all you need to know about pediatric cochlear implantation. Bienvenidos a CI2019 Miami!
**Student Opportunities at CI2019 Pediatric**

**CI2019 Student Scholarships**
Student scholarships will be offered for full-time students, fellows, and postdoctoral scholars who have a clinical or research interest in cochlear implants. The CI2019 scholarship application will be available on the ACI Alliance website October 1, 2018. Visit [https://www.acialliance.org/page/Scholarship](https://www.acialliance.org/page/Scholarship) for more details.

**Student Poster Competition**
A Student Poster Competition will be held for those enrolled in an undergraduate, graduate or resident program. An academic advisor or another university official must verify student/resident status. Students should submit for a poster abstract via the regular conference abstract submission process and indicate their desire to participate in the competition. The abstract site will open in September 2018. [http://ci2019miami.org/site/](http://ci2019miami.org/site/)

Interviews with the judges for all those participating in the student poster competition will be held in the afternoon of Wednesday, July 10, 2019 at the conference venue. Students participating must be present to present their research to the judges. Based on the large number of participants in 2018, ACI Alliance will be doubling the number of recognition awards. Two poster winners will receive a $100 cash prize. Four honorable mention winners will be recognized. All will be announced at the conference and in ACI Alliance materials and will also be awarded a student membership for the duration of their academic program.

---

**ACI Alliance Blogs**

This area on our website is coordinated by Naama Tsach, PhD, a speech language pathologist and an educational audiologist. There are three blogs that cover a range of topics on cochlear implantation and rehabilitation for adults of all ages. These are resources for professionals and especially patients who are looking for tips for rehabilitation and want to hear about the experiences of other recipients. You can find the blog area by clicking here: [https://www.acialliance.org/page/ACIABlog](https://www.acialliance.org/page/ACIABlog)

The most extensive blog is the **Adult Cochlear Implant Rehabilitation**. This resource is primarily authored by Naama and covers wide-ranging topics related to adult rehabilitation post CI.

**A Young Adult’s Perspective** is authored by Miranda Meyers, a college student who was born deaf and received a cochlear implant when she was two years of age. Her posts provide a very personal perspective about her life as a deaf young adult who communicates entirely with spoken language.

**An Octogenarian’s Cochlear Implant Journey** follows the experiences of Bruce Sloane, an 82-year-old man who pursues a cochlear implant. The beautifully written blog covers his decision to move forward, the medical and audiological evaluations, the surgery, and the early outcomes. For anyone who asks, “Am I too old to have a cochlear implant?”, Bruce's blog is an exceptional resource.

---

**Membership Update: New Military Membership and More for Consumers**

To further expand our efforts to support access to care for veterans and military personnel as described in Dr. Driscoll’s column above, we now offer a membership category for members and veterans of our military. The new free **Military Membership** is open to all non-clinical Members of the United States Armed Forces and Veterans with hearing loss. (Military and governmental employees may attend the annual CI conference at a government rate.) Please share information about this free membership option with your patients so they may benefit from the information we provide and the opportunity to participate in our advocacy and other activities.

A Consumer Membership is available at $10 for parents of children with hearing loss, adults with hearing loss, family members and other advocates. Individual Professional Memberships are $125. CI clinics, schools, universities, hospitals and other centers may wish to take advantage of our Organizational Membership, which allows all employees to be registered on the same account. Organizational Members are included in our “Find a Cochlear Implant Clinic” directory (the most visited page on our website) to help potential patients and referring healthcare professionals locate a clinic. Please note that only Organizational Members are listed in the Find a CI Clinic map.

To learn more about ACI Alliance Membership benefits, visit [https://www.acialliance.org/general/register_member_type.asp](https://www.acialliance.org/general/register_member_type.asp)

To check out the “Find a Cochlear Implant” map resource visit: [https://www.acialliance.org/search/custom.asp?id=2365](https://www.acialliance.org/search/custom.asp?id=2365)
Confidence over the Phone

*Captions confirm every word they hear.*

CapTel® Captioned Telephones show word-for-word captions of everything a caller says over the phone. It’s like closed captions on TV, only for phone calls. CapTel restores a patient’s confidence in talking over the telephone, knowing they can confirm what they hear just by reading the captions.

**A no-cost CapTel phone is available for your patients with hearing loss.**

**REQUIREMENTS:** Hearing Loss, High Speed Internet, Dial-tone.

No-Cost Phone with valid third-party certification is subject to change without notice. Terms and conditions may apply. **FEDERAL LAW PROHIBITS ANYONE BUT REGISTERED USERS WITH HEARING LOSS FROM USING INTERNET PROTOCOL (IP) CAPTIONED TELEPHONES WITH THE CAPTIONS TURNED ON.** IP Captioned Telephone Service may use a live operator. The operator generates captions of what the other party to the call says. These captions are then sent to your phone. There is a cost for each minute of captions generated, paid from a federally administered fund. No cost is passed on to the CapTel user for using the service. CapTel captioning service is intended exclusively for individuals with hearing loss. CapTel® is a registered trademark of Ultratec, Inc. The Bluetooth® word mark and logos are registered trademarks owned by Bluetooth SIG, Inc. (v1.5 7-18)
Celebrating a Birthday with a Gift to ACI Alliance

ACI Alliance Member and dedicated Ohio State Champion Sarah Mowry MD celebrated her recent birthday with a gift to ACI Alliance through a fundraiser on her Facebook profile. She decided she didn’t want gifts for her birthday since, like many of us, she felt she already had “too much stuff.” When an ad popped up on her Facebook feed about creating a fundraiser to support a cause she cared about, she decided this was the perfect opportunity to support the ACI Alliance mission and celebrate her birthday.

Dr. Mowry is familiar with hearing loss on a personal level. She has a family member who is deaf. While the relative is not a candidate for a CI, that person was a motivating factor in her becoming an otolaryngologist.

“It is amazing to help someone hear. Hearing is how we communicate, how we interact with other people. I was happy to promote a group that supports that goal.”

Dr. Mowry has been an ACI Alliance member and State Champion since 2013 and is active in our public policy activities to promote CI access. She also strongly supports providing families with unbiased communication options. She would like for families to receive information with all the options available for their deaf or hard of hearing child.

We are grateful to Mowry for her involvement in our work and also for the generous gift we received via her birthday fundraiser. We’re delighted she had a wonderful birthday!

If you would like to donate to ACI Alliance, visit https://www.acialliance.org/page/SupportUs.
To learn more about setting up a Facebook fundraiser, select “Fundraiser” on the left side of your FB page and follow the directions.

“It is amazing to help someone hear. Hearing is how we communicate, how we interact with other people. I was happy to promote a group that supports that goal.”

Birthday girl Sarah Mowry
Advocacy Update

Nichole Westin, MA, Governmental Affairs Manager, ACI Alliance

At present, ACI Alliance has 90 State Champions representing 40 states. They are from across the continuum of cochlear implant care but they have in common an abiding interest in public policy issues that impact on CI access and appropriate care.

As a group, our State Champions have discussed state initiatives by a group called LEAD-K that has organized efforts in many states. We and others feel these efforts seek to interfere with parent choice on communication modality for a deaf or hard of hearing child by implementing evaluation criteria for young children that could result in placing pressure on parents to use ASL if a child doesn’t meet the criteria. An additional concern that we have is that the LEAD-K programs would require additional state funding when the programs being suggested are already part of IDEA.

As we foresee a big state legislative push in 2019, ACI Alliance has met with other organizations in the field to discuss a collaborative approach at the state level. We will continue to reach out to others with a common interest in ensuring parent choice. If you wish to get involved in addressing LEAD-K efforts in your state, contact Nichole Westin of our staff.

State Committees

One of the ways we will be growing our own grassroots network is through the development of State Committees. This is an opportunity for professionals, consumers and parents interested in CI advocacy and awareness of cochlear implantation to be involved. State Committee participation is open to members interested in policy and awareness who wish to work with our State Champion leaders. Some possible topics include LEAD-K, Medicaid, and early intervention advisement practices. State Committee Members might send letters or attend meetings organized by State Champions. Legislators are more willing to listen to any well-crafted argument if there are a number of constituents speaking with the same voice.

Our approach for strengthening the state committees is to begin small by starting in a few states, but we encourage anyone interested to reach out. We will be trying various approaches to signing on volunteers and we could use your help in identifying people. ACI Alliance will provide training and support with outreach. If you are interested in getting involved at the state level, please contact Nichole Westin at nwestin@acialliance.org.

Cochlear Implant Coverage for Children and Adults Under Medicaid

Ensuring that patients have appropriate access to insurance coverage is a key organizational priority. All 50 states and Washington, DC cover children under Medicaid, but the nature of coverage as well as the amount reimbursed to clinics varies greatly. We surveyed CI clinics last year and found that there are access to care issues created by state regulations. Medicaid regulations often limit sound processor replacements, numbers of batteries provided, and sufficient coverage of therapy. We believe that these state processes and rules interfere with the original Congressional intent to ensure appropriate services for Medicaid-covered children under federal law—regardless of where the child lives. We will be discussing the findings with Federal policy-makers in the Fall 2018.

CI coverage of adults under Medicaid is optional under Federal law; whether and how adults are covered is determined by the individual states. An estimated 60% of states cover eligible adults for cochlear implants under Medicaid. ACI Alliance was contacted by Disability Rights Maryland (DRM), an organization that advocates for the legal rights of Maryland residents with disabilities. DRM was interested in pursuing CI coverage for adults under Maryland Medicaid. ACI Alliance provided information and supported the effort. The State of Maryland made the decision to cover cochlear implants for adults under Medicaid starting in July 2018.

After reviewing the proposed Maryland Medicaid regulations and discussing them with Maryland State Champion Dawn Marsiglia, an audiologist at Johns Hopkins, we developed and submitted comments. Our comments addressed some ongoing issues with Maryland Medicaid coverage on topics that are often mentioned as problems in other states. The Maryland initiative demonstrates that you can successfully advocate for changes in Medicaid adult coverage—particularly when there is partnership with other disability (legal) groups and state government offices. Read our comments on the proposed Maryland rule at https://www.acialliance.org/page/AdvocacyInitiatives.
American Cochlear Implant Alliance participates in a number of coalitions in and out of hearing healthcare, partnerships that help us address access to CI. We recently became the Coordinator for Friends of the Congressional Hearing Health Caucus. The “Friends” is comprised of a dozen organizations representing professionals, consumers, and parents in hearing healthcare. Together we provide support for the Congressional Hearing Health Caucus, a bipartisan educational forum on hearing health and related research comprised of 18 Members of the US House of Representatives. Topics addressed by the Caucus include universal newborn hearing screening, adult hearing screening, access to hearing technology via Medicare, untreated hearing loss, and support for NIH research on hearing and balance.

In May, Friends of the Congressional Hearing Health Caucus organized a briefing luncheon for Congressional staff on untreated hearing loss in older adults. Speakers Barbara Weinstein PhD and David Fabry PhD reviewed research on the health effects including isolation, falls, and increased levels of dementia. Speaker Powerpoint materials are posted here: https://www.acialliance.org/page/FCHHC. Attendees included House and Senate staff from elected officials’ offices as well as staff to a number of key committees such as the Senate HELP Committee.

In August, the Friends sponsored a visit for Congressional staff to visit the National Institute on Deafness and Other Communications Disorders, NIH labs conducting basic research on cochlear development and the genetics of deafness.
Bimodal?

More Patient Benefit, Less Programming Effort
With the Bimodal Fitting Formula and Bimodal Fitting Report

Easier Listening in More Challenging Environments
With the unique Binaural VoiceStream Technology

Ready for Progressive Hearing Loss
With the Naída Portfolio of Hearing Solutions

Learn more about the Naída Link Bimodal Solution at
https://bit.ly/2soOl4r
Trending Topics in Federal Health Policy in the Final Months of the 115th Congress

Peter Thomas JD, Government Affairs Counsel to the ACI Alliance
Lief Brierley MPH, Governmental Affairs Consultant to ACI Alliance
Powers, Pyles, Sutter & Verville PC

With the end of the 115th Congress only a few months away, the federal health policy landscape is revolving around several key issues, including federal appropriations for the fiscal year that begins October 1, Medicaid, and ongoing health reform efforts that could affect access to care and coverage of cochlear implants. In this update, we provide a brief overview of several significant pieces of legislative and regulatory activity impacting topics of interest to ACI Alliance members.

Federal Appropriations Bills
The House and Senate Appropriations Committees have both approved federal spending bills for FY 2019 which would impact federal funding related to cochlear implants (CI). In terms of federal research funding, the National Institutes of Health (NIH) received a $2 billion increase in the Senate Appropriations Committee, and a $1.25 billion increase in the House Appropriations Committee, for a total of $39.1 billion and $38.3 billion, respectively. This translates into funding increases across a number of Institutes, including the National Institute on Deafness and Other Communication Disorders (NIDCD), which would receive an increase of $15 million ($475 million total) in the Senate and $6 million ($465 million total) in the House.

Universal Newborn Hearing Screening programs would receive level funding, with both chambers’ bills allocating $17.818 million for these programs. Overall, final funding amounts have yet to be determined, as the full House and full Senate must each pass their respective funding bills and agree on final levels before the President signs the compromise bill. However, these Committee-approved spending bills are indicative of Congressional support for these priority areas, and action on these bills could occur early this fall.

Medicaid
Medicaid, which serves as a major payer for children may benefit from, or have, cochlear implants, is facing significant changes imposed through the regulatory state waiver process. While it remains unlikely that Congress will press this year for massive Medicaid cuts and structural reforms like they did in 2017, the U.S. Department of Health and Human Services has encouraged states to apply for Medicaid waivers that would make fundamental changes to the federal-state program. Those changes include making receipt of benefits contingent on beneficiaries participating in some form of employment, time-limiting eligibility, and other changes geared toward restricting Medicaid coverage.

The disability community has strongly condemned the use of work requirements, with the Consortium for Citizens with Disabilities calling work requirements “a punitive condition on eligibility that does not accommodate the needs of individual Medicaid beneficiaries, with and without disabilities.” So far, ten states have received approval for Medicaid work requirements; however, recent court cases have challenged these waivers, with a June 29th DC Federal District Court decision blocking Kentucky from implementing its waiver that included work requirements. This ruling will likely set the stage for additional litigation and appeals around this new dynamic in Medicaid. ACI Alliance will continue to monitor the developments concerning Medicaid benefits and cochlear implants.

Health Reform & the U.S. Supreme Court
Finally, while Congressional efforts to repeal and replace the Affordable Care Act (ACA) stalled in 2017, the recent nomination of Brett Kavanaugh to serve as a Supreme Court Justice has raised some fears surrounding the 8-year-old law. Kavanaugh’s nomination has spurred debate as to his likelihood to vote to strike down the ACA should such a case come before the court.

continued on page 11
While his legal record makes such a conclusion difficult to predict, one potential case on the constitutionality of the law and the provisions protecting patients with pre-existing conditions could come before the Supreme Court in the near future, meaning his vote would be crucial.

What Congress was not able to repeal in 2017 is slowly being changed through regulation in 2018. Thus far, the current administration has issued three sets of federal regulations that defer to the states the flexibility to design their private insurance benefit packages, create “Association Health Plans” (AHPs), which are exempt from some ACA consumer protections, and expand short-term, limited-duration insurance plans, which are exempt from pre-existing condition protections and essential benefit mandates. These developments could clearly negatively impact access to and coverage of cochlear implants over time. ACI Alliance will continue to closely monitor this situation.

Manager of Information Technology and Membership Services

The American Cochlear Implant Alliance is seeking a motivated, detail-oriented person to manage our information systems and member services. The position is virtual but involves one to two face-to-face meetings weekly in McLean, VA. The individual must live in the Washington, DC area.

This position involves coordination of all information technology operations for the organization including a website that integrates membership, public information, and internal operations. While having strong technical skills coming in is preferred, we will train the right person who has superlative organizational and communication/writing skills and an interest in what we do. Technical support is provided via outsourced consultants. This position requires a self-starter who can work independently and also contribute as part of a team. Our mission provides a strong motivation for staff as we work to make a difference in the lives of people with hearing loss and personally contribute to the organization’s growth. Qualifications include a Bachelor’s degree and at least three years of work experience that demonstrate strong organizational and communication skills. Knowledge about hearing loss is desirable but not required. Position reports to the executive director. Salary is commensurate with experience.

To apply, send a letter of interest indicating your relevant experience including why you are the best candidate for the job and a CV to: employment@acialliance.org. Please email questions; we ask that you not call the office about the position.
Cochlear™ Nucleus® 7 System

The world's only cochlear implant sound processor with Made for iPhone and Android connectivity.

Register for the Nucleus 7 Audiology Online Course at:
www.audiologyonline.com/audiology-ceus/course/what-s-new-for-cochlear-31457
A STUDENT’S PERSPECTIVE

Student with Cochlear Implants Competes in National Spelling Bee—Again

Interviewed by ACI Alliance Staff

Two years ago we interviewed Neil Maes’ mother, Christy Maes, about her family’s experience with early intervention and guidance provided about cochlear implantation for her child. Neil was 11 at the time and had just competed in the 2016 Scripps National Spelling Bee. Now 13, Neil was recently back in Washington DC to compete a second time.

The path to compete at the national level is difficult. Returning a second time is less common; 22% were return competitors in 2018. Competing twice as a child who is deaf is remarkable. We interviewed Neil by telephone to ask him about the competition process, how he prepares, and what advice he has for other students interested in competing.

ACIA: This year there were 516 competitors at the Bee. What steps were involved for all of you to make it to the national level?

NM: I started with a grade-wide competition and then a school-wide competition in January. Then I went to regionals on March 3 (which was also World Hearing Day). From there I went to the Nationals.

ACIA: This is your second time competing in the National Spelling Bee. How did you become interested in competing?

NM: I started in third grade and won my grade-wide contest and then my school-wide competition. I thought it was fun.

ACIA: How do you prepare for the competition? Did you do anything differently to prepare for this year’s competition compared with 2016?

NM: This year I studied vocabulary a lot more. Part of the written test at Nationals is vocabulary as well as spelling. To move on to the top 50, you need to do well on the vocabulary test. I also have a book with word patterns in different languages that I studied. I studied at least five hours a week.

ACIA: Do you have a “secret” to your success?

NM: When I’m on stage, I try to stay calm and take my time. When I’m spelling, I go slow so I don’t mess up.

ACIA: Do you have any special accommodations to help you hear during the competition?

NM: Yes, the pronouncer of the spelling bee words uses a FM system so that I can hear the words right directly into my sound processors. Otherwise, I compete the same as everyone else.

ACIA: What is the hardest word you’ve been asked to spell?

NM: The word I missed at the 2016 Nationals—polychromatic. I had never heard that word before. It was unfamiliar to me.

continued on page 14
National Spelling Bee continued from page 13

**ACIA:** What do you find to be the most exciting part of the spelling bee?

**NM:** The moment right after you spell your word right!

**ACIA:** What are your future goals?

**NM:** I’d like to go back and compete next year. I want to go to a four-year degree college. I’d like to be a meteorologist, work at AG Bell or for Scripps National Spelling Bee.

**ACIA:** You’d like to compete in next year’s spelling bee?

**NM:** Yes. Next year is the last year I can compete. You can’t enter after 8th grade.

**ACIA:** Do you have any advice for other kids, with or without hearing loss, who would like to compete in a spelling bee?

**NM:** Take your time and study hard. Believe in yourself and don’t listen to people who tell you that you can’t do it.

After the interview we spoke with Neil’s mother. She relayed a story about something that occurred while they were at the most recent National Bee in DC. Another competitor sought Neil out during the event. The other student has a cousin with a cochlear implant; she wanted to have a photo taken with Neil to show with her cousin. She recognized the significance of a student with CIs competing in the National Spelling Bee!

Authors’ Note: Neil finished second at regionals this year and competed in Nationals through the RSVBee program. The new RSVBee invitational program was developed to provide an opportunity for more spellers to participate in the National Finals. This year’s winner was an RSVBee invitee.

**Collaboration with American Academy of Family Practice**

ACI Alliance recently began an initiative to provide information on cochlear implants to primary care physicians with a goal to improve the likelihood that such clinicians know when a patient should be referred for an evaluation. To facilitate the information-sharing process we developed Adult Candidacy for Cochlear Implantation: Clinical Guidance specifically for primary care doctors. [https://www.acialliance.org/page/AdultCandidacy](https://www.acialliance.org/page/AdultCandidacy)

The guidance provides basic information on cochlear implants including when to refer based on functional behaviors (i.e., difficulty understanding when patient is not facing the speaker, family members routinely make telephone calls for a patient) and where to refer. Typical questions, such as “Does health insurance cover this?” are answered.

We are reaching out to the societies for family practice, internal medicine and general pediatrics. We have had a very positive response to our offers to present on cochlear implantation from the American Academy of Family Practice. In 2010, there were an estimated 209,000 practicing primary care physicians in the US with the largest proportion of those (38%) being family physicians. Family physicians see patients of all ages including children. [http://www.ahrq.gov/research/findings/factsheets/primary/pcwork1/index.html](http://www.ahrq.gov/research/findings/factsheets/primary/pcwork1/index.html)

We have pursued opportunities to present at both state and national conferences of primary care physicians and hence were delighted to have been invited to the October 2018 National AAFP Family Medicine Experience meeting (FMX) to present “Cochlear implants have evolved: Which patients in your practice are now candidates?”

If you are interested in connecting with primary care physicians in your community, we will help you. Contact Nichole Westin for more information: nwestin@acialliance.org
With RONDO 2's wireless charging, there's no need to open the processor or change batteries—making it incredibly simple to use. The lightweight off-the-ear design is so comfortable it's easy to forget it's there. And RONDO 2 adapts to changing listening conditions for optimal hearing on the go.

Why RONDO 2?
Easy for Them, Easy for You

With RONDO 2's wireless charging, there's no need to open the processor or change batteries—making it incredibly simple to use. The lightweight off-the-ear design is so comfortable it's easy to forget it's there. And RONDO 2 adapts to changing listening conditions for optimal hearing on the go.

- Easy to use
- Easy to charge
- Easy to wear

With PlusRONDO, candidates who choose MED-EL will receive a voucher for a FREE RONDO 2 with their cochlear implant system! For a limited time only. Learn more at www.medel.com/us/RONDO2.

RONDO 2—It's Never Been Easier